CERTIFICATION FOR COMPLIANCE WITH WATER METERING REQUIREMENTS FOR FUNDING APPLICATIONS







Funding Agency Name: Funding Program Name: Applicant (Agency

Claan	Matar	Ctata	Davalvina	Eund

State Water Resources Control Board

Name:	Clean Water State Revolving Fund			
Applicant (Agency Name):				
Please check one of the	boxes below and sign	and date this form.		
•	rban water supplier, as the	nt agency, I certify under penalty of perjury nat term is understood pursuant to the		
that the applicant agency had 3.5 of the California Water	nas fully complied with th Code (sections 525 thro tted with this certification	Int agency, I certify under penalty of perjury e provisions of Division 1, Chapter 8, Article ugh 529.7 inclusive) and that the ordinances, as listed below have been duly adopted and		
I understand that the Funding Agency will rely on this signed certification in order to approve funding and that false and/or inaccurate representations in this Certification Statement may result in loss of all funds awarded to the applicant for its project. Additionally, for the aforementioned reasons, the Funding Agency may withhold disbursement of project funds, and/or pursue any other applicable legal remedy.				
Name of Authorized Repres (Please print)	entative	Title		
Signature of Authorized Rep	presentative	Date		